‘Sudden’ and ‘Excess’ Deaths Worldwide Cannot be Ignored Anymore

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According to a Canadian study, nearly 17 million people may have died from the Covid-19 vaccine within the first two years of its rollout. The preprint study, totalling 180 pages, is titled *COVID-19 vaccine-associated mortality in the Southern Hemisphere*.

The research team had deduced the death toll by extrapolating data from 17 countries in the southern hemisphere. They were Argentina, Australia, Bolivia, Brazil, Chile, Colombia, Ecuador, Malaysia, New Zealand, Paraguay, Peru, Philippines, Singapore, South Africa, Suriname, Thailand and Uruguay.

Altogether, these nations “comprise 9.10 % of worldwide population, 10.3 % of worldwide COVID-19 injections (vaccination rate of 1.91 injections per person, all

ages), virtually every COVID-19 vaccine type and manufacturer, and span 4 continents." From a methodological perspective, this is a sound approach.

According to the study, "In the 17 countries, there is no evidence in all-cause mortality (ACM) by time data of any beneficial effect of COVID-19 vaccines. There is no association in time between COVID-19 vaccination and any proportionate reduction in ACM. The opposite occurs." In layman's terms, the vaccines had killed more people than they had allegedly cured or protected.

The actual death toll may amount to many more millions. According to a 2009 Harvard Pilgrim Health Care grant report by Ross Lazarus and Michael Klompas, only 1% of adverse events from vaccines are reported.

"Adverse events from drugs and vaccines are common, but underreported. Although 25% of ambulatory patients experience an adverse drug event, less than 0.3% of all adverse drug events and 1-13% of serious events are reported to the Food and Drug Administration (FDA). Likewise, fewer than 1% of vaccine adverse events are reported."

Bear in mind that the 1% thumb rule was based on data compiled in the United States and may not be applicable elsewhere. Many doctors worldwide had refused to report adverse events from Covid-19 vaccines as they feared retribution from either Big Pharma or their respective national health authorities. Or both!

Here is what one troubled doctor admitted to an acquaintance of mine who was hospitalised after his first Moderna injection: "You are part of the greatest human experimentation in history. If I upload your case into the (VAERS) system, I will lose my job." (I am repeating this nearly verbatim).

One doctor in my neck of the woods, while acknowledging the surge in Sudden Adult Death Syndrome (SADS) among those aged 40 and below, intentionally misdirected the fatalities to physical, mental and sleep-related stresses caused by the lockdowns. The media loves this stuff. What was omitted however was that his own father had died of a heart attack within a few days of taking the Pfizer shot. Just how many families worldwide actually dare blame the coronavirus

vaccines for the sudden deaths of their loved ones? Are they reeling from guilt? Or is it a matter of apathy?

Even when human resolve exist, many Third World nations may not have a functioning adverse events reporting system for a variety of reasons. These variables should be considered in any vaccine causality study. Therefore, the actual casualty figures may vary from country to country. By the fall of 2022 — *a full year before* the Canadian study was released — a group of experts had inferred that nearly 20 million people may have perished from the Covid-19 vaccines, with an additional two billion suffering from varying degrees of adverse effects.

But for now, what is happening in nations not cited in the Canadian study? Here is a sampling.

India

Sudden and excess deaths are expectedly surging in India, as they are elsewhere. Based on the arguments of dissident experts during the early days of the "pandemic", I had predicted the following scenario in May 2021.

More than 18 months later, India's *National Herald* posed a similar conundrum in a December 2022 report: "While there is no cause for panic, reports of otherwise healthy people suddenly collapsing and dying do need to be investigated to determine if there is any correlation with vaccines or something else."

India's National Crime Records Bureau (NCRB) data showed that nationwide sudden deaths had increased by 12% in 2022, with nearly 57% of these deaths arising from heart attacks.

There was however another upward trend associated with these grim statistics. The nation's "pharmamongers" were profiting immensely as the death tolls mounted, especially after India became a base for the mass production and export of Covid-19 vaccines at discounted costs. India's vaccine tycoon, Adar Poonawalla, even managed to purchase a $173 million mansion in London!

India prefers to remain in denial. Selected "experts" from Kerala, one of the worst affected Indian states, joined the coronavirus gravy train by rubbishing any

linkages between sudden/excess deaths and Covid-19 vaccines. Excess youth mortality was chalked up to smoking, drinking and drug abuse. An unnamed ***2011 study*** was quoted in the media to prove *The Science*. In reality, tobacco and alcohol consumption had been receding in Kerala for decades. But the contra-arguments be damned; it is the Big Pharma pork barrel that matters.

United Kingdom

Another nation in denial is the United Kingdom. A Daily Mail report on March 4 dodged the common denominator behind the surge in sudden/excess deaths. Here are some excerpts:

> "Between 10 to 20 percent of my heart attack patients are now under the age of 40," says Dr Martin Lowe, a consultant cardiologist at St Bartholomew's Hospital and The Portland Hospital, both in London.
>
> "In the US, data shows around one in five heart attack patients is under 40 and we're catching up in the UK. *"When I was a junior doctor it was extremely rare to see young people — most patients were smokers in their 50s and 60s."*
>
> Dr Joe Mills, a consultant cardiologist at Liverpool Heart and Chest Hospital, adds: 'We have really noticed the trend for younger people from mid-20s upwards having heart attacks in the past five years in particular.
>
> "Now as a cardiologist, you wouldn't even raise your eyebrows when seeing someone in their late 30s — it's becoming fairly typical, which is frightening."

These British experts laid the blame on a "number of factors... including poor diet and obesity, a sedentary lifestyle, an increase in the number of young people developing type 2 diabetes (which is associated with thicker and stickier blood which raises the risk of blood clots and, in turn, heart attacks), smoking and alcohol."

As for blood clots, surely these experts are deliberately overlooking the increasing prevalence of long rubbery, alien-like clots that have spooked embalmers since 2021?

Japan

Japan was perhaps the only major economy that showed some hesitancy towards the vaccines. Apparently, there were no vaccine mandates in Japan. Informed consent entailed an actual discussion between a doctor and a recipient before the consent form was signed.

Once adverse events data trickled in, a few eminent experts, led by Prof Masanori Fukushima, warned that *"billions of lives could ultimately be in danger"* due to the experimental injections. Prof Takayuki Miyazawa, once a pro-vaccine advocate himself, even took to the streets to warn his fellow citizens of the vaccine's lethality.

In September 2022, a rapid deluge of adverse events forced Japan to terminate the distribution of the AstraZeneca Covid-19 shots. Only 120,000 injections were administered nationwide out of a contracted 120 million doses. There are rumours that millions of these discarded vaccines were eventually sought and distributed by a Southeast Asian nation — free of charge — as part of its nationwide vaccination campaign. These doses were allegedly marked as "purchases".

Much like everything related to the global coronapsychosis, the truth and the profiteers are still out there. But not so with Japan.

The foremost fear among Japanese experts is the *"extinction of Japan"* as a result of the vaccines. Call it a "vaxtinction". But is this level of alarm justified? Well, the government budget for "health damage benefits from coronavirus vaccines" for the year 2023 was increased 110 times — from 360 million yen to 39.77 **billion** yen!

Findings from the Japan's Vaccine Issues Study Group which was released on Jan 11 2024 paints an equally grim outlook. Here is an excerpt from Aussie17's recent write-up:

> Professor Emeritus Masanori Fukushima of Kyoto University urgently addressed the diverse array of side effects uncovered by their study. “A systematic review of the literature has unveiled some shocking information,” he stated, setting a grave tone from the outset. ”Thousands of papers have reported side effects after vaccination, affecting every possible aspect of human pathology – from ***ophthalmology to psychiatry***.” Noting the broad scope of these findings, he highlighted that ”this kind of reporting on drug side effects or the like is unprecedented.”

In other words, the vaccines are not only causing sudden and excess deaths, they are actively suppressing the body’s natural immune system. In medical parlance, this condition is called Immune Deficiency Syndrome (IDS) which is exactly the same as Acquired Immune Deficiency Syndrome (AIDS) minus the HIV catalyst.

South Korea

South Korea is also slowly coming to terms with the lethality of the vaccines. Since Aussie17 is one of the best compilers on this subject matter, I will again quote a few excerpts from his latest report.

> In a heartfelt press conference, voices from South Korea’s civil community rang out, calling for immediate action to address the tragic aftermath faced by families of COVID-19 vaccine victims. Cho Su-kyung, chairman of the Life Recovery Citizens’ Group Coalition, and Kim Doo-kyung, chairman of the COVID-19 Vaccine Victim Family Association, shed light on a grave issue: the severe side effects caused by hastily approved COVID experimental gene therapy.
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> **”Due to vaccine side effects, there have been around 2,700 deaths and about 19,000 severe cases.” ”These are official statistics, but the actual numbers are said to be more than 10x higher!”**
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> Given that 96% of South Korea’s population of 51.7 million has been vaccinated, these official figures — if indeed far below the actual counts — paint a grim picture of vaccine safety and oversight. With an

> estimated 27,000 deaths potentially linked to vaccine side effects, this equates to roughly 1 death for every 1,915 vaccinated individuals, a rate that for many raises significant concerns about the risks associated with these vaccines.

The 'Vaxtinction' Agenda

Other bioengineered vaccines are proving to be just as lethal or worse than the Covid-19 injections. The globalist "vaxtinction" agenda must be pursued by any means, under any imaginary or engineered pretext.

As Covid-19 steadily loses its fear factor — with booster uptakes rapidly on the wane — the US Centers for Disease Control and Prevention (CDC) has quietly pigeonholed this once scary "global pandemic" into the same slot as the common flu.

Other new medical scares will have to be invented or hyper-exaggerated. Vulnerable families will be cajoled by pharmamongers in stethoscopes aka "doctors" to sign up for the latest preventative injection. It is all about "protecting the children and the elderly".

According to a Geller Report dated Jan 5 2024: "Independent researchers discovered a 'very alarming' and 'disturbing' spike in newborn deaths in France coinciding with the rollout of vaccines for infants. This increase, the researchers said, coincides with the introduction of Beyfortus RSV (respiratory syncytial virus) vaccine in French hospitals, which began on Sept. 15, 2023. The drug is offered as a 'one-time shot for infants born just before or during the RSV season and for those less than 8 months old before the season starts', and for some 'high-risk 8- to 19-month-old infants'."

Just how many more new vaccines will be mandated or "recommended" for unsuspecting people worldwide? Or more to the point, what is the ideal depopulation figure from the globalist standpoint?

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